The New York Hospital-Cornell Medical Center Annual Report 1992

EXTENDING OUR REACH

The Medical Center's new Women's and Children's Health Center of Western Queens.

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On the cover:

(Standing, far left) Dr. Katherine D. LaGuardia, medical director of the new Women's and Children's Health Center of Western Queens, and CUMC medical student David Bell greet a patient in the center's spacious and cheerful waiting room, while Dr. Margaret Levitt, pediatrician, amuses some of the center's younger patients.

The New York Hospital-Cornell Medical Center has an impressive record of community outreach spanning more than six decades and crossing local, national, and international boundaries. In 1992, the medical center extended many of its past outreach programs and created new ones. The 1992 annual report will take you to some of the communities these programs now serve. Delivering care in New York City's low-income housing projects, educating future physicians for rural America, or conducting research in the third world have been and will continue to be central to our outreach mission.

In 1992, both The New York Hospital and Cornell University Medical College marked achievements that will reinforce the medical center's role as an invaluable provider of health care, a leader in medical education, and a pacesetter for basic and clinical research.

Chairmen's Report

In 1992, The New York Hospital-Cornell Medical Center saw multiple goals come to fruition bringing the medical center to a major turning point in its distinguished history. Anticipating significant changes in the way health care is financed and delivered, New York-Cornell made exceptional progress toward assuring its continuation as a vital clinical, academic, and scientific resource.

The New York Hospital and Cornell University Medical College reaffirmed their historic partnership in 1992 with the resolution of all outstanding real estate issues and by initiating joint strategies to meet the challenges of the future. The two institutions will work closely together to preserve their three-fold mission of patient care, education, and research. As evidence of this renewed relationship, the hospital and college are embarking on a cooperative capital campaign to meet the critical needs of both institutions, not the least of which are for new and expanded facilities.

Although specific national health care reform remains undefined, there are two concepts uniformly discussed: universal access and managed competition. In anticipation of new methods of health-care delivery, we began to establish a health-care network in which The New York Hospital remains a tertiary care referral center, while sponsoring a number of hospitals and ambulatory sites throughout the metropolitan area that would deliver primary care to their local communities. The network will enable member institutions to maintain the level of care provided locally, while producing a system of seamless care from basic and preventive medicine to advanced specialty treatment, when needed. Providing an important link between primary and tertiary care, the development of the network complements the institution's plans for new facilities to house the most advanced technology and services.

On December 3, 1992, the State Hospital Review and Planning Council granted unanimous approval for the hospital's major modernization project. This final go-ahead was the culmination of a process that began in 1973, when The New York Hospital obtained air rights to construct new inpatient facilities over the FDR Drive. In 1988, the hospital's Board of Governors approved the current Certificate of Need. During the ensuing four years, the hospital prepared detailed architectural and engineering plans, and negotiated with more than 40 state, city, and federal agencies in order to obtain all the necessary authorizations for the $908-million project. On May 10, 1993, we celebrated the conclusion of this long process with an official groundbreaking ceremony.

Cornell University Medical College remains one of the most sought-after medical schools in the country having a place for only one in every 50 applicants. The college's reputation for recruiting under-represented minority students is unmatched by any other private medical school in the United States. This record reflects the longstanding commitment and a carefully designed and extremely effective recruitment program now celebrating its 25th year. Furthermore, its M.D.-Ph.D. program, conducted jointly by Cornell University Graduate School of Medical Sciences, including its Sloan-Kettering Division and The Rockefeller University, continues to attract and graduate future leaders of the medical and scientific community.

New York-Cornell's quality reputation is enhanced by the generous support of individuals and institutions for its patient care, education, and research initiatives. These donors share in and reinforce the vision for our medical center as an institution that will influence the future of medicine. This year, friends of the medical center contributed more than $50 million to help further our goals. Sadly, the medical center lost a beloved friend and benefactor in 1992 — Beatrice Seaver, who had recently been named a Life Governor of The New York Hospital. An active member of the medical center community for many years, the generosity of Mrs. Seaver and her late husband benefitted programs in obstetrics and gynecology, pulmonary medicine, hematology/oncology, and cardiology, to name a few. Her dedication will continue to serve as an inspiration to us all.

As we reflect back on 1992, we recognize the foresight of the Boards of The New York Hospital and Cornell University Medical College, as well as their administrative leadership, in preparing to accommodate changes in national health-care policies which are expected to affect both hospitals and medical schools. We also congratulate them on renewing the spirit of cooperation between the two institutions. The two boards have come together enthusiastically to help foster their goals and meet their mutual challenges. Particular thanks go to Harvey E. Sampson, who has served diligently as chairman of the college's board for the past two years. His guidance and commitment during what was a particularly difficult time in the relationship between the college and the hospital is gratefully appreciated.

At the core of this year's annual report is the theme "Extending Our Reach." It speaks not only to the formation of the network, which enables us to broaden our efforts to deliver the highest quality care to the greatest number of people, but to the numerous unsung advocates of our community service projects, many of which have served as models for outreach programs nationwide. From the medically underserved neighborhoods of Western Queens to the tropical jungles of Brazil, from newly-constructed satellite health-care centers to makeshift clinics in churches and schools, New York-Cornell has had an important presence beyond its geographic boundaries. It is a presence that will continue and expand as the hospital and college together take further steps to ensure that New York-Cornell remains a premier, world-class academic medical center.

Maurice R. Greenberg
Chairman, Board of Governors
The Society of the New York Hospital

Arthur J. Mahon
Chairman, Board of Overseers
Cornell University Medical College

(Left to right)
Dr. Robert Michels, Maurice R. Greenberg, Dr. David B. Skinner, and Arthur J. Mahon

Dean's and President's Report

We are extremely proud of the accomplishments of The New York Hospital-Cornell Medical Center in 1992. Both the hospital and the medical college marked singular and joint achievements that will serve to fortify the medical center's role as an invaluable provider of health care, a leader in medical education, and a pacesetter for basic and clinical research.

A New Era of Cooperation

Following complex negotiations, the college and hospital resolved pressing real estate issues enabling the two institutions to reaffirm their joint commitment to a positive course for the medical center. Their efforts will be helped by the establishment of a joint strategic planning process led by a new vice president and vice provost for strategic planning.

The real estate agreement stipulates a 225-year lease arrangement between Cornell University and The New York Hospital for its current buildings and enabled Cornell University to purchase the hospital's 1301-1303 York Avenue property. The medical school plans to construct a new multipurpose facility on the site which will be used to provide critical research space, develop new clinical and educational programs, and provide support services for students.

Major Modernization Begins; Health Care Network Expands

At year's end, the hospital received its Certificate of Need for new inpatient facilities, the largest and most sophisticated medical facilities project ever approved for a voluntary not-for-profit hospital in the United States. We want to thank the numerous individuals and departments involved in moving this project ahead and to extend our appreciation to the entire staff of the medical center for their patience and understanding about the inconveniences a project of this size can cause. Major modernization of the medical center is critical: New patient care and research facilities will enhance our ability to function, to attract the quality of faculty necessary to remain preeminent, and to exercise regional and national leadership in health-care delivery.

With rising concerns over growing medical costs, the hospital has taken the lead to ensure quality care in a managed-care setting through the development of the NYH Care Network, Inc. Its purpose is to assemble around a tertiary care center providers in the

metropolitan area and beyond who can deliver first-rate primary care to large numbers of patients. Consequently, network affiliations — hospitals, nursing homes, ambulatory care centers — will not only benefit from New York-Cornell's clinical standards, but will reap significant financial rewards and savings from volume purchasing and shared services.

As American medicine shifts from hospital-based to outpatient and community-based settings, there will be a need for training more and more students in primary care. The college will be developing new educational programs in association with the hospital's expanding ambulatory and generalist clinical activities.

College Strengthens Ties to Ithaca

The medical college campus represents approximately 25 percent of Cornell University's academic activities, yet historically neither the medical college nor the Ithaca campus has taken full advantage of the relationship. 1992 marked the beginning of a series of major new programs designed to realize the full potential of this partnership.

In June 1992, several faculty and senior staff members from the medical college traveled to Ithaca to discuss how to better integrate their programs. Modern communications technology, such as video conferencing, is one method now being employed to improve collaboration between the campuses and to take advantage of combined educational resources. In June 1993, the medical college hosted a reciprocal visit by Ithaca faculty members for a full-day program on research, education, and social aspects of medicine and discussions on developing cooperative working relationships.

A direct result of this improved interaction is the establishment of a New York Hospital-Cornell Medical Center affiliation with Tompkins Community Hospital and the initiation of a primary-care and ambulatory training elective for medical college students in Ithaca beginning in August 1993. This is the medical college's first rural teaching affiliate.

Clinical Advances, Research Breakthroughs, and New Faculty Noted

According to survey results announced in 1991 by the Institute for Scientific Information, the faculty of Cornell University Medical College was found to have the second-highest citation rate for clinical research papers among 50 U.S. medical schools. Therefore, it is not surprising that the medical center continued to make headlines in 1992 with groundbreaking research, as well as with the development of new diagnostic and treatment techniques, and the formation of innovative prevention and clinical programs. These achievements include: Discovery of the underlying structure of the agent that causes hepatitis; research that may hold the key to preventing severe effects of septic shock; a study showing that job strain may raise blood pressure and enlarge the heart; the first successful birth in the United States after an embryo biopsy to prevent genetic defects; performance of one of the first laparoscopic hysterectomies in the metropolitan area; and approval of a new drug to shrink an enlarged prostate.

Dr. Donald A. Fischman, the Harvey Klein Professor of Biomedical Sciences, and a noted educator, administrator, and authority in the field of cell biology and molecular genetics, was named the new dean of Cornell University Graduate School of Medical Sciences and senior associate dean of the medical college. In his dual role, Dr. Fischman has responsibility for graduate education and for the college's research activities. Dr. E. Darracott Vaughan, the James J. Colt Professor of Urology, has become senior associate dean for clinical affairs at the medical college.

The appointment of Dr. Ronald G. Crystal to the Bruce Webster Professorship of Internal Medicine and as chief of the division of pulmonary and critical-care medicine (effective April 1993) brings a new dimension to the medical center's biomedical research endeavors. Dr. Crystal, formerly chief of the pulmonary branch of the National Heart, Lung, and Blood Institute, is a pioneering researcher in gene therapy for cystic fibrosis and other pulmonary conditions.

The medical center initiated several patient care programs in 1992. These include the Women's and Children's Health Center of Western Queens, which brings much-needed health care to a medically underserved community; Bruce House, a quarterway residence program of our Westchester division, which helps individuals coping with psychiatric illness to make the transition from hospitalization to independent living; and the Institute for Prevention Research, which will develop and test interventions for preventing drug abuse in African-American and Hispanic-American adolescents.

Looking Toward the Future

We have an ambitious agenda facing us over the next year and through the end of the decade. Bottom lines will continue to concern us — in 1992, the hospital and the college met their financial targets — as proposed federal and state changes in health-care policy threaten major sources of revenue and therefore the viability of large academic medical centers. A renewed bond between The New York Hospital and Cornell University Medical College unites their efforts to advance the medical center's mission.

As we embark on major building plans for both the college and the hospital and redefine our geographic boundaries of care by establishing the network and by expanding our outreach programs, we will keep our sights on what really matters — the delivery of superb health care to our communities, research that will lead to further improvements in that care, and the education of physicians and biomedical scientists who will continue the process into the future.

Robert Michels, M.D.
The Stephen and Suzanne Weiss Dean
Cornell University Medical College

David B. Skinner, M.D.
President
The New York Hospital

Making Progress in Prostate Care

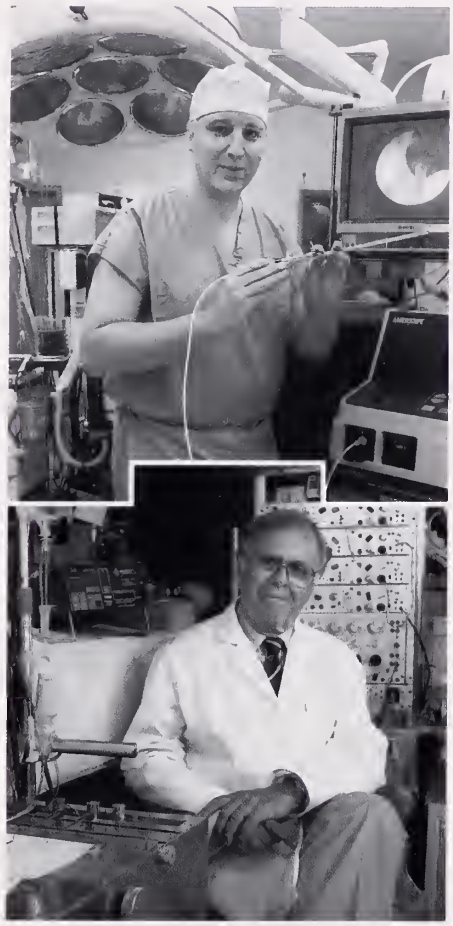
More than half of all men in the United States over the age of 50 suffer from non-cancerous conditions of the prostate — a walnut-sized gland at the base of the male bladder — that cause painful urinary problems. About 165,000 men in the United States will be diagnosed with prostate cancer this year — more than any other cancer for men — and about 34,000 will die.

At The New York Hospital-Cornell Medical Center, doctors and researchers are breaking ground in the diagnosis, treatment, and prevention of prostate conditions.

The medical center was among the first in the metropolitan area to use a laser to treat benign prostate enlargement. The procedure, which is currently under study, removes obstructing prostate tissue using a laser beam, rather than an electrical current, and offers several advantages over the more common electrosurgical approach. "The laser procedure requires less anesthesia for the patient, takes less time to perform, causes less bleeding, and requires a shorter hospital stay," says Dr. E. Darracott Vaughan, acting chairman, department of urology, who is investigating the procedure along with colleague Dr. Aaron Perlmutter, director of the department's new prostate center.

Research at Cornell University Medical College laid the groundwork for the development of Proscar, a new drug recently approved by the FDA, that shrinks enlarged prostates. The drug, which works by inhibiting an enzyme linked to prostate growth, could reduce some of the 400,000 surgeries performed each year. It was based on research by Dr. Julianne Imperato-McGinley of the division of endocrinology.

In a joint effort with the Strang Cancer Prevention Center, New York-Cornell recently began the first High-Risk Prostate Registry in the United States. The registry offers a free screening — including a physical exam and special blood test — to men over 40 who have a family history of prostate cancer. Those listed in the registry will have the chance to participate in promising research into the prevention and early detection of the disease.



Top: *Dr. Aaron Perlmutter is investigating a new laser procedure to treat enlarged prostate.*

Bottom: *Dr. Donald Reis conducts some of the country's most encouraging brain research.*

Revealing Secrets of the Brain

To the millions of Americans who may suffer the effects of stroke, hypertension, or degenerative brain diseases, Cornell's pivotal revelations about the brain's own mechanisms offer exciting clinical promise.

The research laboratory of Dr. Donald Reis, chief, neurobiology, has made electrifying discoveries with the potential for treating stroke and reducing hypertension. In innovative studies, Dr. Reis has found systems within the brain itself that protect it against a stroke. "We are working to identify the underlying chemical and molecular events, so we can begin developing drugs to replicate this kind of mechanism," says Dr. Reis. A second ingenious strategy to battle stroke is through the development of what is called an anti-sense chemical. This reduces additional damage after a stroke by turning off the receptors for agents whose excessive release destroys brain cells.

Dr. Reis's group has also discovered transmitters and receptors in the brain stem that may be the brain's mechanism for regulating blood pressure, and have isolated and purified a molecule that could lead to a novel treatment for hypertension.

Another fundamental finding by Dr. Reis is his discovery of neurons in the brain that sense low oxygen and initiate survival-oriented cardiovascular responses. Dr. Fred Plum, chairman, neurology and neuroscience, says, "It is an internal system for signalling danger and turning on defenses — a fire control system of the organ."

The quality of brain research and the superb clinical programs at Cornell have led to major grant awards in different aspects of neuroscience. A $2.5-million grant by the Starr Foundation funds a unique clinical and research collaboration between the Hebrew Home for the Aged in Riverdale and the medical center. The four-year Starr Program for Neurogeriatric Studies pursues causes and treatment for neurologic illness in the aged, with special emphasis on Alzheimer's disease.

Related studies at Cornell's new Institute for Human Neurosciences, funded in part by a $4-million development grant from the Lucille P. Markey Charitable Trust, seek to identify how the brain separates conscious from unconscious choices. One such study focuses on cues from the visual system that may be early indicators of Alzheimer's. This is one of many studies being conducted in the department on the biologic mechanisms that make up human consciousness.

Looking to the future of brain research at Cornell, Dr. Plum says, "We anticipate that the tenacious research skills and imaginative spark of the medical center's gifted scientists, combined with today's sophisticated diagnostic instrumentation, will continue to revolutionize this field."

January

Cornell medical students help fight tuberculosis by conducting free screenings in lower-income neighborhoods.

Cornell sponsors its 8th Annual Conference on Health Policy which explored social and medical issues concerning the health of the poor.

March

Mayor David Dinkins spends a week as a patient in The New York Hospital.

The college's graduates find out about their residencies and internships during Match Day — 89 percent of the class received matches with one of their first three choices.

The Laboratory of Psychopharmacology officially opens to study biological factors which may contribute to developmental disorders in children.

April

Stepping Out benefit supports Bruce House, an innovative residential program offered by the medical center's Westchester division.

The Children's Emergency Medical Fund in the department of pediatrics celebrates the success of *Light Up a Life*, which raised $82,000 for the fund.

Dr. George G. Reader, the Livingston Farrand Professor Emeritus and former chairman of the department of public health, is the 16th recipient of the medical center's Maurice R. Greenberg Distinguished Service Award.

The department of anesthesiology opens new research labs in the Lasdon Biomedical Research Center.

May

The department of obstetrics and gynecology benefits from the annual fashion show featuring Isaac Mizrahi's 1992 fall/winter collection.

The division of cardiology dedicates its newly equipped and renovated cardiac catheterization laboratories made possible by a $2-million gift from Dorothy and Lewis B. Cullman.

Dr. C. Everett Koop, a distinguished Cornell alumnus and former U.S. Surgeon General, addresses the medical college's 95th graduating class as a prelude to joining the college as a visiting scholar.

Dermatologists at the medical center give free skin-cancer examinations to 250 people during Skin Cancer Detection and Prevention Month.

June

Friends and supporters of the Children's Blood Foundation contribute $100,000 as a result of the foundation's 29th annual benefit at the Metropolitan Opera House.

A youngster from Azerbaijan is discharged following successful surgery for treatment of a life-threatening congenital heart defect.

Dr. Anne Belcher, a 96-year-old otorhinolaryngologist, who has long been associated with the medical center, celebrates her retirement after more than 60 years of practice.

July

New York-Cornell AIDS researcher Dr. Jeffrey C. Laurence leads other scientists in reporting a puzzling finding about the occurrence of AIDS symptoms in patients with no evidence of HIV infection at the 8th Annual International Conference on AIDS.

The medical center establishes the Institute for Prevention Research to address behavioral risk factors associated with major public health problems such as AIDS, substance abuse, and teenage pregnancy.

September

The New York Hospital and Cornell University Medical College resolve real estate issues paving the way for joint planning for the medical center.

The Strang-Cornell Breast Center opens to offer coordinated and comprehensive treatment programs for women with breast cancer.

The New York Hospital expands the NYH Care Network, Inc. with sponsorship of Booth Memorial Medical Center in Queens.

October

The 10th Annual Women's Health Symposium celebrates its major milestone with a focus on what women need to know to survive in the 1990's and beyond.

The Auxiliary of The New York Hospital sponsors its 1992 *Pick-A-Treat* Halloween Raffle to raise money for the medical center's new Children's Pain Control Program.

November

Dr. Donald A. Fischman is named the new dean of Cornell University Graduate School of Medical Sciences and a senior associate dean of the medical college.

The new Women's and Children's Health Center of Western Queens marks its official opening.

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December

The New York Hospital receives the final go-ahead for its major modernization project from New York City's Planning Commission.

The 10th anniversary *Cabaret!*, the most successful gala in recent years, honors Iris and B. Gerald Cantor, longtime friends and supporters of the medical center.

The division of dermatology at Cornell University Medical College establishes its first endowed professorship.

1. *In his role as a visiting scholar, former U.S. Surgeon General Dr. C. Everett Koop leads a discussion on health-care reform.*

2. *Opening the new Psychopharmacology laboratory are (from left) Dr. William A. Frosch, interim chairman, psychiatry; Nanette Laitman, daughter of Mildred Lasdon and the late William Lasdon; Dr. Robert Michels, dean of the medical college; Dr. P. Anne McBride, director of the new laboratory; and Arthur J. Mahon, chairman, board of overseers, CUMC.*

3. *Before ten-year-old Farkhad Kerimov leaves for Azerbaijan, he receives a fond farewell from Dr. Arthur Klein, associate director of pediatric cardiology (left); "Dr. Bobo," a member of the Clown Care Unit; and Dr. Jeffrey P. Gold, attending surgeon in cardiothoracic surgery.*

4. *Dr. Jeffrey Laurence, associate professor of medicine, is one of the country's leading AIDS researchers.*

5. *(Seated, from left) Stephen H. Weiss, chairman, Cornell University's board of trustees; Maurice R. Greenberg, chairman of the hospital's board of governors; Dr. David B. Skinner, president of NYH; and (standing) Dr. Robert Michels (left), dean of the medical college; and Arthur J. Mahon, chairman of CUMC's board of overseers, formalize the real-estate agreements.*

6. *During Match Day, CUMC senior Michael Economos is about to find out where he will be doing his internship.*

7. *Jacqueline Kennedy Onassis extends well wishes to her friend and physician Dr. Anne Belcher during her retirement party.*

8. *Cornell medical student Michael Frand gives a TB test to a youngster during a free testing and immunization outreach program.*

9. *Dr. George G. Reader (left) with Bernadette Castro Guida and Maurice R. Greenberg at the annual Greenberg Award Gala.*

10. *Upon his discharge from the hospital, Mayor Dinkins speaks to the press as First Lady Joyce Dinkins; Dr. Adrian Edwards, the Mayor's personal physician; and Dr. David B. Skinner, president of the hospital, look on.*

11. *Dr. Mathew C. Varghese, assistant attending physician (dermatology), participates in the medical center's free skin-cancer screening.*

12. *Mr. and Mrs. B. Gerald Cantor help celebrate a decade of* Cabaret!

13. *U.S. Surgeon General Dr. Antonia Novello addresses a capacity crowd at the 10th Annual Women's Health Symposium.*

Building on a Proud Tradition

On May 10, 1993, The New York Hospital broke ground for a $908-million, 12-story, 772-bed building that will span the FDR Drive, rising majestically on the East River. With a scheduled completion date of 1998, this new building, only the fourth major construction in the hospital's 220-year history, is one of the year's most significant accomplishments.

"This construction is vital for New York-Cornell to continue its outstanding leadership in health care," says Dr. David B. Skinner, president of The New York Hospital. "The new building will provide state-of-the-art medical, clinical, and research facilities to attract the incomparable faculty that is the heart of the medical center's international preeminence."

Stretching from 68th Street to 70th Street on a platform above the FDR Drive, the one-million-square-foot building will house an emergency room; intensive care units, including a neonatal ICU; a burn center, operating rooms, labor and delivery suites, and rooms for general pediatric, medical, surgical, and psychiatric patients. It will serve as a magnet for new patients, providing not only superior technological equipment to improve patient care, but a polished contemporary image critically necessary in today's highly competitive medical marketplace, where patients shop for amenities.

The new building will also provide down-to-earth, practical solutions to improving health-care delivery. Its horizontal orientation and increased number of ICUs mean that departments will be able to coordinate progressive care on a single floor, reducing elevator traffic and increasing efficiency. Nursing stations have been configured in an innovative, open design that improves their functionality.

The older buildings will continue to house ambulatory-care programs, operating rooms, and diagnostic and laboratory services; medical and administrative offices; and other support areas.

The new building will be physically connected to the original buildings; its design will link gracefully to the past as well. Roger Soto, senior designer for the project at Hellmuth, Obata & Kassabaum, creators of the building along with Taylor Clark Architects, says, "The building was planned as an extension of the campus grid, using materials and elements similar to the existing design vocabulary, like the neo-Gothic arches of the older buildings. The major public spaces are classical in composition and are conceived of as noble rooms through which people flow."

In another link to its rich past, The New York Hospital has kept the cobblestones from the original driveway. Temporarily removed during the installation of new underground electrical and oxygen systems, these will be replaced when construction of the front entrance is completed.

Creating an Umbrella of Care

"For any hospital to flourish in the current climate surrounding health care, it must broaden its patient base, increase services, and reduce costs," says Dr. David B. Skinner, president of The New York Hospital. "The hospital that will thrive during the decades to come will need to respond to increasing government requirements for managed and regulated competition, and actively pursue the marketplace of managed care."

Anticipating these heightened pressures, The New York Hospital has been moving steadily to establish itself as the flagship in a network of community hospitals, ambulatory care centers, and nursing homes. In 1992, the hospital established the NYH Care Network, Inc., a corporation that forms a structure for

Left: *An architect's model of the new New York Hospital.*

Inset: *Dr. Robert Michels (left) and Dr. David B. Skinner literally break ground for the new hospital.*

Top right: *Queens Borough President Claire Shulman and Dr. Tracy E. Strevey Jr., president and chief executive officer, New York Hospital Medical Center of Queens, usher in a new era in health care for Queens.*

Bottom right: *The New York Downtown Hospital was the first hospital to join the network.*

binding, sponsored relationships in which hospitals are actually linked through their boards.

"This is a great adventure," says Dr. Skinner. "Being united in a network allows us to offer comprehensive care programs from the physician's office, through the community hospitals, and up to the regional centers and tertiary centers. By having New York-Cornell play a central role in network development, we insure that the quality of this hospital's health care will be available across the whole metropolitan area."

The NYH Care Network, Inc., currently includes New York Downtown Hospital, Amsterdam Nursing Home, Gracie Square Psychiatric Hospital, The Rogosin Institute, and The Hospital for Special Surgery in Manhattan; New York Hospital Medical Center of Queens and its Silvercrest Extended Care Facility; and New York Methodist Hospital and Community Hospital of Brooklyn. Similar alliances are being discussed with facilities in the tri-state area.

"The purpose of this network is not to create central control. The independent operation of these institutions is critical to their strength in the local community and their ability to respond to community needs," says Stephen S. Mills, executive vice president and director of the NYH Care Network, Inc. "The network helps to insure the financial stability of the participating institutions and provide security for their employees."

Dr. Robert Michels, the Stephen and Suzanne Weiss Dean of Cornell University Medical College, sees the network as both a challenge and an opportunity. "There are possibilities for academic, educational, and investigative activities in generalist and primary care that may not be available at The New York Hospital itself. We are presented with special challenges for the medical center: How can Cornell and the network best help each other achieve their goals? How can we demonstrate, as we have for 60 years, that in spite of complexities and potential tensions, the union of these two systems is far more valuable to the community than either would be without the other? I would foresee an academic medical center and a network which can set themselves as models for the nation."

Each of the member establishments brings unique experience to the network. With 487 beds, the New York Hospital Medical Center of Queens (formerly Booth Memorial Medical Center), is a successful teaching hospital and trauma center. The New York Hospital plans to develop the institution into a tertiary care center. For example, Queens currently has no cardiac surgical program. The New York Hospital hopes to introduce an extension of its own superb cardiothoracic program.

The 560-bed New York Methodist Hospital (formerly the Methodist Hospital of Brooklyn) is designated a regional radiation oncology center and recently opened Brooklyn's first spine center.

The New York Downtown Hospital (formerly New York Infirmary-Beekman Downtown Hospital), the first to join the network, is a 300-bed facility that is the only acute care hospital south of Houston Street. The hospital reaches out to the Asian community—25 percent of its staff are able to speak Chinese.

Gracie Square, a 220-bed facility which will be a transitional home for the Payne Whitney psychiatry program, has first-hand experience with 30 managed care contracts, including the Health Insurance Plan of Greater New York. This supports the network's primary purpose of establishing The New York Hospital in the managed care market.

"As far as we know," says Dr. Skinner, "this is the only network of this type in which a series of hospitals have voluntarily bonded themselves around an academic medical center, in a corporate way, to provide coordinated services for an urban area."

Exporting Our Medical Expertise

When you first meet Dr. Warren Johnson, you are taken by his fascination with fax machines. "Just look," he says, "in seconds, my colleague in Brazil will be reading my comments on our latest manuscript." But Dr. Johnson has always had a keen interest in communicating with distant lands. "Growing up, I collected stamps," he recalls. "I was amazed that these little pieces of paper came from places halfway around the globe."

For the past 25 years, Dr. Johnson has traveled around the world setting up medical facilities for preventing, treating, and investigating the most serious infectious diseases affecting our global neighbors. As professor and chief of Cornell University Medical College's division of international medicine, he has assembled a veritable who's who of international medical experts to tackle these challenging problems.

In 1980, Dr. Johnson and Dr. Jean Pape, a Cornell associate professor, were among the first to observe the early stages of AIDS while treating patients in Haiti. The division recently received funding from the National Institutes of Health for PAVE (Preparation for AIDS/HIV Vaccine Evaluation) to prepare for the logistical challenges inherent in testing an AIDS vaccine.

Since 1969, Dr. Johnson has directed Cornell's faculty and student exchange program in Bahia, Brazil — the oldest of its kind in the world. Now, through Cornell's Committee for International Programs for Students, supported largely by private donations, fourth-year medical students can take elective credit abroad. For example, students have assisted Afghan refugees in Pakistan and participated in a nutrition project in Kenya.

The division's impressive roster of 18 physician/scientists includes Dr. John Ho, an associate professor, who is a major contributor to the research efforts in Haiti and Brazil, and Dr. Lee W. Riley, an assistant professor, who was named a 1992 PEW Scholar, an award recognizing America's most promising biomedical researchers. There are currently 16 research and training projects ongoing.

Top: *Dr. Warren Johnson (left), Dr. Philip B. Marsden, adjunct professor, CUMC, and a Brazilian rural health worker make their way through a tropical rain forest near Tres Brachos, Bahia, Brazil, 1979.*

Bottom: *Bonnie Howell, president of Tompkins Community Hospital, on site at Cornell's newest elective.*

Far right: *Surena Fazeli-Matin, a fourth-year medical student, helps out at a drop-in center for the homeless.*

Dr. Johnson's study on the natural history of HIV infection, begun in 1983, was just recognized with the NIH's prestigious Merit Award enabling his research to continue to the year 2000.

Not bad for a youngster whose first glimpse at the world was through a stamp collection.

An Elective Where the Grass Is Greener

Two hundred and fifty miles northwest of New York City, in the heart of the beautiful Finger Lakes region, the newest elective program for Cornell University Medical College students can be found. On June 10, 1993, Tompkins Community Hospital, a 204-bed, full-service hospital in Ithaca, New York, became Cornell's first rural teaching affiliate. It offers primary and ambulatory-care training that is increasingly difficult to secure at major, urban hospitals. Tompkins' 160 physicians serve a community of 100,000 within a 50-mile radius of the hospital.

"The elective program reflects Cornell's commitment to more vital interaction between the medical college, the Ithaca campus, and the community," said Cornell University President Frank H.T. Rhodes. Medical students can opt to travel to Tompkins Community Hospital in their fourth year for a four-week training module. During the elective, students will accompany Tompkins doctors on hospital rounds and spend time in their private offices.

"They will have first-hand experience in primary-care medicine — the bedside manner, daily aspects of internal and pediatric care, and patient-doctor interactions in offices and clinics," said Dr. Richard B. Roberts, professor and vice chairman of the department of medicine and associate dean for affiliations at Cornell University Medical College. "This will complement the training they receive in a tertiary facility, such as The New York Hospital, where specialty and subspecialty instruction are more prominent."

Bonnie H. Howell, president and chief executive officer at Tompkins, is delighted with the new relationship. "The affiliation offers Tompkins the best of both worlds — enabling our doctors to have access to Cornell's specialists and providing them with an opportunity to teach," said Ms. Howell. Under the arrangement, the medical director at Tompkins will hold an academic appointment at the medical college and the doctors involved in teaching will have adjunct status on the Cornell medical faculty.

The elective rounds out the medical student's urban (The New York Hospital) and suburban (North Shore University Hospital-CUMC) education. "There is a national decline in the number of doctors choosing generalist and primary-care medicine," says Dr. Robert Michels, the Stephen and Suzanne Weiss Dean of Cornell University Medical College. "We hope that this elective, by providing exposure to delivering care in a rural setting, will provide our students with a wider array of models and choices in these areas."

Volunteering On the Front Lines

Where are nearly 75 percent of Cornell University Medical College's first- and second-year student body when they are not in a classroom, at the library, or in their dorm rooms? Probably delivering first aid in a homeless shelter near Grand Central Station, counseling teens about AIDS at a local high school, or providing measles immunizations to children in a housing project in lower Manhattan.

These are only a few of the projects coordinated by Cornell's community service program, created four years ago as a result of student interest in volunteering. Regarded as a model for medical student volunteerism, the program often factors into a student's decision to attend Cornell.

"The community service program enables us to connect curriculum to real life," says Dr. Bruce Ballard, associate dean, student affairs and equal opportunity programs. "It exposes students to experiences which may be helpful in determining career paths, sensitizes them to different populations, and prepares them for physician-patient interactions."

"The fact that I could get out and apply what I would be learning in the first two years of medical school was a reason I came to Cornell," says Wendy Hobson, a second-year student active in the program's homeless first-aid project.

But there's another side of the story: The thousands of individuals who benefit from the students' outreach efforts. "By checking on health status, providing first aid, and linking our clients to a clinic or hospital, the students help us focus on the health needs of our population, which are often overshadowed by the need for shelter and social services," says Gail Wolsk, director, Grand Central Partnership Assessment and Referral Center, which runs a center for the homeless where Cornell students volunteer every Thursday evening.

In the words of Hippocrates, "The gift of healing is inextricably tied to the giving of self." Cornell's medical students couldn't be more on target.

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Care Coach
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This sampling of programs conducted by the medical college and the hospital illustrates the breadth and scope of the medical center's outreach efforts.

1. *Cornell University President Frank H.T. Rhodes (left) and Dr. Robert Michels, the Stephen and Suzanne Weiss Dean, Cornell University Medical College, during a visit by Ithaca faculty to the college.*
2. *Dr. Albert L. Rubin, director of The Rogosin Institute, and Dr. David B. Skinner, president of The New York Hospital, flank Queens Borough President Claire Shulman at the ribbon-cutting ceremony for the Institute's new Queens Dialysis Center.*
3. *A Cornell medical student introduces youngsters to the dangers of drug and alcohol use as part of the Adolescent Substance Abuse Program (ASAP).*
4. *Kindergarten students from Trinity School on Manhattan's West Side don O.R. caps and masks to examine Cornell medical student Wendy Hobson during their visit to the medical center.*
5. *Medical student Tony Yen (left) administers a measles vaccine during a community screening under the guidance of Dr. John J. Ferry Jr., associate professor of clinical pediatrics.*
6. *Paramedic John Zobel greets patients boarding the medical center's care coach, a free community transportation service.*
7. *At the medical center's Westchester division, the Bruce House quarterway residence provides a supervised, home-like setting to help patients adapt to community living.*
8. *Irwin Goodman, a volunteer counselor for HealthOutreach, sorts through health insurance forms for client Anne Friedman.*
9. *Karen Hawes, R.N., coordinates the hospital's Teenage Pregnancy and Parenting program which provides prenatal and postpartum care for young mothers and their infants.*
10. *(From left) Dr. Warren Johnson, Dr. Jean Pape, and Dr. Peter Wright, professor of medicine, Vanderbilt University, in front of the Cornell-Haiti Center for Infectious Diseases, Port-au-Prince, Haiti.*
11. *The New York Hospital's community advisory board meets regularly to counsel the hospital on health needs of the community.*

Older, But Not Forgotten

She worked and raised a family. Now, at 75, she lives alone. Sometimes, she would like to have the company of her contemporaries. Other times, she needs a counselor to sort through her medical bills. She could use a little help around the house, but certainly isn't ready for a nursing home.

Who is she? She's exactly the type of person the medical center's HealthOutreach program was created to help. HealthOutreach, a program of the department of social work, is a free service providing vital information on health and social services for older adults.

"We're not trying to compete with community agencies or reinvent the wheel," says Helen Miller, director of the program. "Many older people don't know about the services that exist and turn to hospitals for help. We provide an assessment of their needs and help put them in touch with the right programs."

The program also offers referrals to physicians, counseling, a lecture series, assistance with insurance claims, blood pressure screenings, support groups, and Lifeline — a 24-hour emergency response system.

The Stanley Isaacs Health Care Center, an off-site clinic operated by the hospital since 1973, also helps older adults maintain their independence. Nestled in the lobby of the Stanley Isaacs Neighborhood Center on First Avenue and 93rd Street, the center is a welcome fixture in the neighborhood.

"Our patients want to remain in their own home," says social worker Eleonore Rios, who has been with the center since 1978. "They prefer the risk of living alone to entering a nursing home, or even to living with their children." To minimize that risk, the staff provide a range of support services to keep their patients functioning independently.

"We try to keep our patients as healthy and content as we can," says Marian Unterman, R.N., the center's head nurse. This may mean routine examinations, medical care for chronic conditions, or arranging for home care. And it's working. Just ask about the center's oldest patient, who at 103 years old, is getting along splendidly in her own apartment.

Never Too Soon to Tell

At three years old, Linda Tso can build a tall tower of blocks, speak in short, clear sentences, and wiggle her thumb when asked. That's just what a child her age should be able to do, according to the child developmental specialists at The New York Hospital. Thanks to funding by The New York Hospital Auxiliary and grants from the United Hospital Fund, the Fan Fox Foundation, and the Ahmanson Foundation, these specialists have taken the hospital's child development program on the road, benefitting children who are not as far along as Linda Tso.

Linda was screened at P.S. 126, an elementary school on the outskirts of Chinatown, where the program makes its home every Thursday, from 9:00 a.m. to 4:00 p.m. Entitled "A Better Tomorrow for Today's Children," the program is available free-of-charge to local families who have children six months to five years old. It is now expanding to five additional sites in Manhattan and Queens.

"Our goal is to reach out to families who wouldn't ordinarily have access to The New York Hospital to uncover developmental problems before their children reach school age," says Evelyn G. Lipper, M.D., director, division of child development in the pediatrics department at New York-Cornell. "We decided on a school as our base because it offers a friendly environment where parents are willing to take their children for screening."

"We see a lot of children in the medical center's clinic with undiagnosed problems and realized that we needed to cast a wider net," says Mary J. Ward, Ph.D., the program's developmental psychologist. "The public

Far left: *Geriatrician Dr. Deborah Friedlander, assistant attending physician, The New York Hospital, has an easy rapport with Stanley Isaacs' clients Joseph Gregor, 77, and Frieda Rosner, 96.*

Top: *Linda Tso is obviously pleased with her tower of blocks as is Dr. Evelyn Lipper, who screened Linda for developmental milestones.*

Bottom: *Dr. Katherine LaGuardia and medical student David Bell discuss the services of the Women's and Children's Health Center with a patient.*

school system was extraordinarily supportive because they were seeing the serious repercussions of undetected developmental delays in their third and fourth graders."

Word of the screening program spread quickly with the help of school personnel, a community liaison hired specifically for the program, and an active network of community groups. Dr. Lipper, Dr. Ward, and colleague Marie Whiteside, M.D., have screened more than 600 children and have found 23 percent exhibiting notable delays. When indicated, parents are also assisted in obtaining further evaluations or referrals to appropriate resources for such disorders as autism, mental retardation, visual and hearing impairment, and language delay. "It is never too soon to evaluate children," says Dr. Lipper. "The earlier we can diagnose problems, the easier it is to begin positive steps to overcome them."

Women and Children First

"I've been to so many clinics and because you have Medicaid, it's terrible. But here you feel special."

That's how Nicole Scheu, 25, described the Women's and Children's Health Center of Western Queens, a satellite clinic operated by The New York Hospital-Cornell Medical Center in Long Island City.

The clinic, which opened in October, fills a crying need for primary health care among residents of three large, low-income housing projects. It offers gynecologic and pediatric services in a cheerful, safe, attractive building complete with a well-stocked playroom.

"Our main philosophy is to empower women to care more about themselves, their children, and their community," says Dr. Katherine D. LaGuardia, medical director of the clinic. "One of the things that has been very striking to me is how many patients I've seen who haven't had a pap smear in years or have never had a mammogram."

The center's staff of 15 includes a gynecologist, pediatricians, an HIV counselor, a social worker, a child development specialist, a nurse, and nursing assistants. Patients receive ongoing health care from the same doctor. In addition, the center's health van tours the neighborhood, dispensing health information and making appointments.

"We show our patients that you can get good health care in a friendly, inviting place," says Rosaire McDonald, the center's administrator. "Once they see that, they return for regular visits."

By opening the clinic within walking distance of the housing projects, accepting Medicaid for payment, and providing a place for children to play, the center has succeeded in removing obstacles that keep low-income families from receiving health care.

David Bell, a second-year medical student at Cornell University Medical College, is helping to make the center's services even more accessible, including providing children's physicals from the health van. "The first two years of medical school are very theoretical," notes Bell. "The center allows me to see how medicine is actually practiced in a primary-care setting."

Before the center opened, Nicole's son James, 4, was behind in his immunizations and she rarely saw a doctor herself unless it was an emergency. Now, Nicole said, both James and her eight-month-old daughter Samantha are up-to-date on their immunizations.

Nicole Scheu is not the only resident of Western Queens who has discovered the center's quality health care. In the first eight months of operation, the center had over 6,300 visits. This summer, the center added general medical care to its services, broadening its reach into the community. Prenatal care and an adolescent clinic are planned for 1994.

Surely 1992 will be remembered as a watershed year in the history of The New York Hospital-Cornell Medical Center. The medical college and hospital strengthened their association, which now spans the greater part of the century. Meanwhile, both institutions have sought to enhance their historic missions during a period of rapid change that is affecting teaching hospitals nationwide. New York-Cornell has always been fortunate in the number of individuals and institutions who generously lend their support. Gifts and pledges to the medical center during 1992, totaling $50,131,263, demonstrate that this year was no exception in attracting the philanthropic endorsement and affirmation of the patient care, education, and research carried out here.

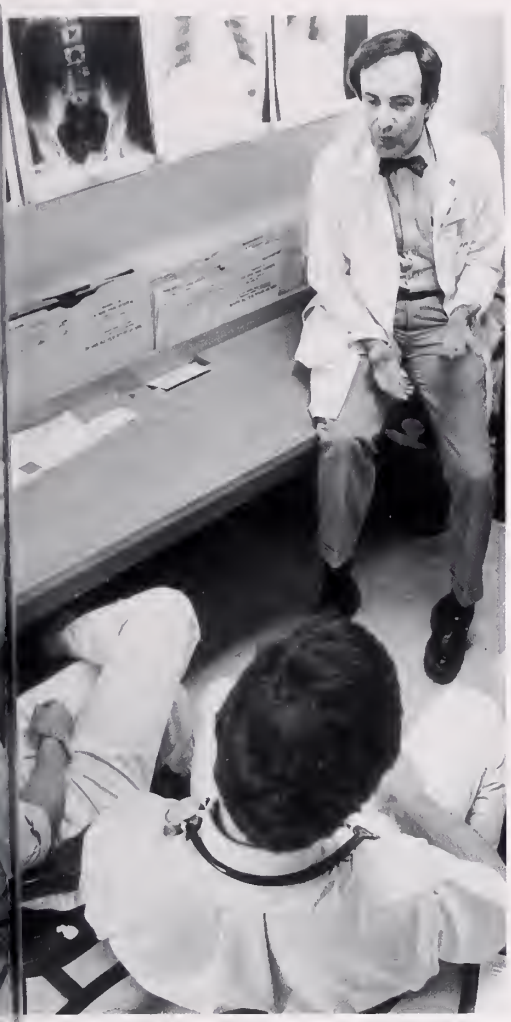
In addition to the vigorous solicitation of gifts from individuals, foundations, and corporations, development efforts have focused on preparations for a major capital campaign for the medical center, which will be announced formally on September 22, 1993. Known as New Horizons for Medicine, the campaign has an ambitious goal of $600 million which will help build new inpatient and educational facilities, strengthen endowments and programs, hone pioneering biomedical research, and increase efficiency in offering health care to the broadest spectrum of New Yorkers. When successfully completed, New Horizons for Medicine will provide the wherewithal for New York-Cornell to meet its most pressing needs and to engage the challenges of medicine in the coming century.

In preparation for the campaign, a committee has been formed, comprised of Overseers, Governors, and members of the Medical Center Advisory Board. Members of the committee include Frank A. Bennack, Jr., Mrs. B. Gerald Cantor, Eleanor T. Elliott, Maurice R. Greenberg, Arthur J. Mahon, John E. Merow, Robert Michels, M.D., David B. Skinner, M.D., Ronald P. Stanton, Sanford I. Weill, and Stephen H. Weiss. The campaign committee sets development policy and establishes subcommittees which will assist in taking the campaign's message to the widest possible circle of New York-Cornell's family and friends. Each member of the committee has devoted incalculable hours to the rigorous work of the advance campaign, and we extend our heartfelt gratitude.

For all the significant successes of the year past, the future holds even greater challenges. We ask you to join us in our pride at the accomplishment of so much that is worthwhile, and to share our excitement as we look toward the next century with a renewed sense of purpose.

Robert A. Burch

Robert A. Burch
Vice President and Vice Provost for Development



Fulfilling the medical center's three-fold mission: (clockwise) healing and preserving health, educating, and finding answers.

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Statistical Summary

The New York Hospital-Cornell Medical Center

Services to Patients	Laboratory	3,387,668
	Blood Bank	470,607
	Radioisotopes Services	99,992
	X-ray Examinations	136,277
	Operations	22,285
	Deliveries	3,865
	Electrocardiograms	74,811
	Electroencephalograms	3,374
	Social Services Interviews	438,818
	Therapy Treatments (Physical, Occupational, Recreational)	241,308
	Transfusions	29,142
	Pharmacy Prescriptions	3,588,107
	Record Room - New Case Records	49,338
	Average Number of Full-Time Employees	6,246

Distribution of Beds	**Private**	
	Baker-Medicine	77
	Baker-Surgery	41
	Obstetrics and Gynecology	29
	Pediatrics	5
	Total Private	**152**
	Semi-Private	
	Medical/Surgical	442
	Two-Bed Baker-Medicine	61
	Two-Bed Baker-Surgery	33
	Urology	26
	Obstetrics and Gynecology	59
	Pediatrics	107
	Total Semi-Private	**728**
	Sub-Total Manhattan Division	**880**
	Newborn Bassinets	44
	Payne Whitney Clinic	108
	Total Manhattan Division	**1,032**
	The Westchester Division	322
	Grand Total	**1,354**

Patient Care	Patients Admitted Manhattan Division (including neonatal admissions)	33,104
	Newborn	3,576
	Payne Whitney Psychiatric Clinic	1,307
	The Westchester Division	2,118
	Total	**40,105**
	Patient Days, All Divisions Including Newborn	425,313
	Visits to Day Hospital	13,119
	Visits to Outpatient Clinics	190,018
	Visits to Emergency Pavilion	52,662

Educational Program 1992 - 1993	Medical Students	394
	Graduate Students	202
	M.D.-Ph.D. Students (medical and graduate enrollments)	75
	Degrees Conferred (1992 - 93 academic year)	128
	M.D.	96
	Ph.D.	29
	M.S.	3
	Faculty (including all affiliates - 1992-93 academic year)	3,390
	Full-Time	1,489
	Part-Time	100
	Voluntary	1,801
	Clinical Fellows	131
	House Staff (NYH-CMC only)	542
	Health-Related Students:	
	Dental Hygienists	2
	Dietetic Interns	24
	Emergency Medical Technicians	10
	Medical Social Workers	35
	Surgical Assistants	38
	Samuel J. Wood Library/C.V. Starr Biomedical Information Center (1992 - 93 academic year)	
	Visits	475,612
	Journals (titles)	1,537
	Total Volumes	150,958
	New Books Received	1,492

Profile of Entering Medical Students September 1992 (101 enrolled out of total applicant pool of 4,714)	Men	51
	Women	50
	Minorities	9
	New York State Residents	46
	College Majors	Science (73%); Non-Science (27%)
	Mean Grade Point Average	3.51
	Average Age	22.4
	Age Range	20 - 36
	Universities With Five or More Graduates Admitted:	
	Cornell	23
	Harvard	6
	Princeton	5
	Stanford	5
	Yale	5

Research (July 1, 1991 - June 30, 1992)	Federally Sponsored Research (including fellowship and research training) - Total Expenditures	$52,627,517
	Privately Sponsored Research - Total Expenditures	$17,547,301
	Research Projects Funded - New and Renewals	315

Financial Summary

The New York Hospital-Cornell Medical Center

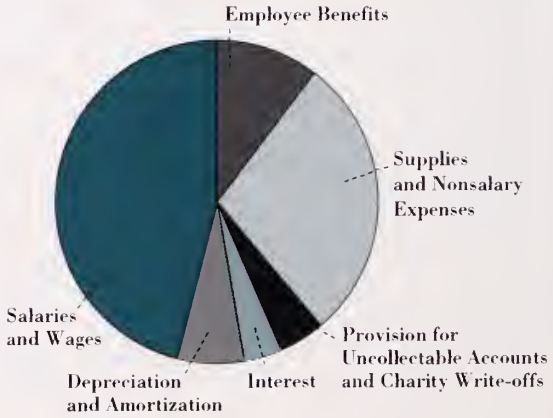
The Society of the New York Hospital

January 1 - December 31, 1992

Revenues	**$ Millions**	**%**
Net Patient Revenues	540.6	95.0
Other Revenues (Excluding donations)	28.3	5.0
Total	**568.9**	**100.0%**
Expenses		
Salaries and Wages	272.6	48.0
Employee Benefits	61.8	10.9
Supplies and Nonsalary Expenses	160.5	28.2
Provision for Uncollectable Accounts and Charity Write-offs	24.7	4.3
Interest	15.6	2.7
Depreciation and Amortization	33.3	5.9
Total	**568.5**	**100.0%**
Revenues in Excess of Expenses	**0.4**	

Revenues as a percentage of total patient care and other revenues

Expenses as a percentage of total expenses

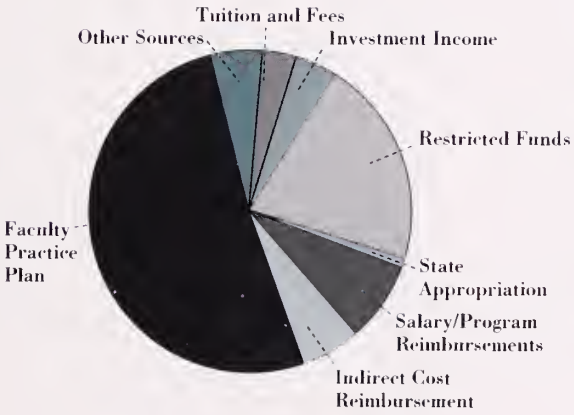


Cornell University Medical College

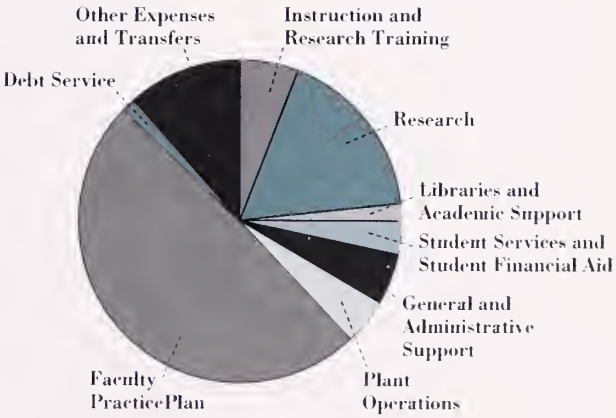
July 1, 1991 - June 30, 1992

Revenues	$ Millions	%
Tuition and Fees	10.0	3.4
Investment Income	11.9	4.0
Restricted Funds	63.8	21.5
State Appropriation	0.3	0.1
Salary/Program Reimbursements	27.3	9.2
Indirect Cost Reimbursement	15.3	5.2
Faculty Practice Plan	152.9	51.6
Other Sources	14.7	5.0
Total Revenues:	**296.2**	**100.0%**
Expenses		
Instruction and Research Training	17.9	6.0
Research	51.6	17.4
Libraries and Academic Support	4.7	1.6
Student Services and Student Financial Aid	9.2	3.1
General and Administrative Support	15.7	5.3
Plant Operations	14.5	4.9
Faculty Practice Plan	142.3	48.1
Debt Service	4.0	1.4
Other Expenses and Transfers	36.3	12.2
Total Expenditures:	**296.2**	**100.0%**

REVENUES AS A PERCENTAGE OF TOTAL COLLEGE REVENUES



EXPENSES AS A PERCENTAGE OF TOTAL EXPENSES



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The New York Hospital-Cornell Medical Center

The New York Hospital-Cornell Medical Center

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As of July 1993

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Robert S. Hatfield

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Kenneth H. Hannan
(1966-1974)
Stanley de J. Osborne
(1975-1980)
Robert S. Hatfield
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The New York Hospital-Cornell Medical Center

The New York Hospital-Cornell Medical Center represents an affiliation of The New York Hospital and Cornell University Medical College. Physicians at the medical center have appointments in both institutions.

Chiefs of service at The New York Hospital, with the exception of the physiatrist-in-chief, serve as chairmen of corresponding clinical departments of Cornell University Medical College. Physicians at the hospital have faculty appointments in the medical college. For the sake of simplicity, however, the medical center's clinical faculty are listed here by their hospital titles only and not by their academic titles.

In addition to the clinical departments, the center also has basic science departments. Since the work of these departments consists almost entirely of teaching and research, many basic science faculty do not have hospital appointments. They are, therefore, listed here by academic title.

The medical center has affiliations with a number of institutions, including The Hospital for Special Surgery, the Burke Rehabilitation Center, Memorial Sloan-Kettering Cancer Center, North Shore University Hospital, Catholic Medical Center of Brooklyn and Queens, Lenox Hill Hospital, St. Barnabas Hospital, the Will Rogers Institute, LaGuardia Hospital, Jamiaca Hospital, New York Downtown Hospital, Rogosin Institute, Strang Cancer Prevention Center, and Blythedale Children's Hospital. Because of space limitations, professional staff at these institutions who do not have New York Hospital appointments are not listed in the following pages.

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Herbert F. Hempel, M.D.
James C. Hirschy, M.D.
Marcy B. Jagust, M.D.
Richard J. Katz, M.D.
Neil M. Khilnani, M.D.
Young Sook Kim, M.D.
George Krol, M.D.
Miriam Levy-Ravetch, M.D.
Charlynn C. Maniatis, M.D.
Robert W. Perone, M.D.
Hollis G. Potter, M.D.
Richard B. Rafal, M.D.
Paula Montgomery Rothaus, M.D.
Stanley N. Schatzman, M.D.
Melissa R. Scheer, M.D.
Craig H. Sherman, M.D.
Scott J. Sherman, M.D.
David W. Trost, M.D.
Karen Weingarten, M.D.
Wendalyn M. Williams, M.D.
James R. Wong, M.D.
David F. Yankelevitz, M.D.

Attending Physicists (Nuclear Medicine)
Rodney E. Bigler, Ph.D.
Pat Zanzonico, Ph.D.

Professional Associate (Physics)
Stephen Balter, Ph.D.

Graduate Staff

Clinical Fellows (Radiology)
Alan J. Boykin, M.D.
Ana G. Cajade-Law, M.D.
Young Hee Choi, M.D.
Judith A. Cohen, M.D.
Raymond L. Davis Jr., M.D.
Kathleen Case Finzel, M.D.
Roger J. Frey, M.D.
Lisa A. Intriere, M.D.
Jeffrey C. Lee, M.D.
Ross I. Lieberfarb, M.D.
Warren S. Lun, M.B., B.S.
Lynette T. Masters, M.B., B.S.
Darius P. Melisaratos, M.D.
Theodore T. Miller, M.D.
John N. Nichols, M.D.
Alan M. Saunders, M.D.
Mukthalata Somanath, M.B., B.S.
Rand Jordan Stack, M.D.

Assistant Radiologists (Nuclear Medicine)
Mordechai Lorberboym, M.D.
George R. Watson, M.D.

Assistant Radiologists
Christel J. Bauer, M.D.
Ermelinda Bonaccio, M.D.
Bradford A. Bottger, M.D.
Jack E. Burson, M.D.
Bruce G. Campbell, M.D., Ph.D.
Betty Ann Caravella, M.D.
Chris E. Chernesky, M.D.

Michele A. Chernesky, M.D.
William D. Donovan, M.D.
Sara M. Durfee, M.D.
Gail E. Eddens, M.D.
Christopher G. Filippi, M.D.
Catherine Streeto Giess, M.D.
Stephen D. Go, M.D.
Peter B. Gusner, M.D.
Douglas E. Hertford, M.D.
Richard S. Jennis, M.D.
Marc L. Jouandet, M.D.
Pamela Knapp Burdett, M.D.
Michael Macari, M.D.
Rene Paul Manzo, M.D.
Eileen T. McGlynn, M.D.
Gustavo A. Mercier Jr., M.D.
Elizabeth A. Morris, M.D.
Melanie Moses, M.D.
Ingrid L. Ott, M.D.
Lawrence Emil Steinbach, M.D.
Dennis R. Swearengin, M.D.
Shari-Lynn Umlas, M.D.
Priscilla A. Winchester, M.D.

Rehabilitation Medicine

Physiatrist-in-Chief
Willibald Nagler, M.D.

Professional Associate (Podiatry)
Michael Polchaninoff, D.P.M.

Associate Attending Physiatrist
Ronald F. Green, M.D.

Assistant Attending Physiatrists
Elisabeth A. Lachmann, M.D.
Sheryl R. Levin, M.D.
Richard Tunkel, M.D.
Irene von Estorff, M.D.

Clinical Affiliates
Andrew D. Brown, M.D.
Sanders W. Davis, M.D.
Steven G. Marini, M.D.
Isabella Maria Rampello, M.D.
Dae-Sik Rho, M.D.
Barry C. Root, M.D.
Alexander C. Simotas, M.D.
Peter H. Stern, M.D.

Professional Associates (Rehabilitation Medicine)
John S. Ferrari
Susan D. Koski
H. Richard Lehneis, Ph.D.
Janet Mines
Dorene Tellerman

Graduate Staff

Assistant Physiatrists
Mark P. B. Bodack, M.D.
Frank R. Collier, M.D.
Adrienne A. Denese, M.D., Ph.D.
Siobhan G. O'Connor, M.D.
Beverly A. Pattillo, M.D.
F. Marlene Perez, M.D.
Robert A. Schulman, M.D.
Ranee M. Shenoi, M.D.
Benjamin S. Warfel II, M.D.

Surgery

Acting Surgeon-in-Chief and Acting Chairman
Roger W. Yurt, M.D.

General Surgery

Attending Surgeons
Roy H. Ashikari, M.D.
Murray F. Brennan, M.D.
Jhoong S. Cheigh, M.D.
Jerome J. Decosse, M.D., Ph.D.
Philip R. Exelby, M.D.
Stephen F. Lowry, M.D.
John L. Madden, M.D.
Charles K. McSherry, M.D.
Michael P. Osborne, M.D.
Walter F. Pizzi, M.D.
S. Frank Redo, M.D.
Robert R. Riggio, M.D.
Albert L. Rubin, M.D.
Kurt H. Stenzel, M.D.
William T. Stubenbord, M.D.
George E. Wantz, M.D.
John C. Whitsell II, M.D.

Associate Attending Surgeons
Anthony C. Antonacci, M.D.
Philip S. Barie, M.D.
Harry L. Bush Jr., M.D.
Armand F. Cortese, M.D.
John Mihran Davis, M.D.
Jerome Finkelstein, M.D.
Cleon W. Goodwin, M.D.
Peter M. Guida, M.D.
Alexander E. Kuehl, M.D.
Michael R. Madden, M.D.
Vincent F. Marzulli, M.D.
Kevin P. Morrissey, M.D.
Stuart D. Saal, M.D.
Michael F. Silane, M.D.
Barry H. Smith, M.D., Ph.D.
John F. Sullivan, M.D.
John C. L. Wang, M.D.

Assistant Attending Surgeons
John M. Aronian III, M.D.
Fadi F. Attiyeh, M.D.
Adolfo M. Ayuyao, M.D.
Anthony C. Cahan, M.D.
James L. Clarke, M.D.
Hiram S. Cody III, M.D.
William T. Curry, M.D.
Richard A. Dietrich, M.D.
Gary A. Fantini, M.D.
Gregory Fried, M.D.
James P. Gaston, M.D.
Mark S. Gordon, M.D.
Paul H. Halebian, M.D.
James P. Kavoussi, M.D.
Michael P. LaQuaglia, M.D.
Michael A. Marano, M.D.
Timothy S. Melester, M.D.
Anthony C. Mustalish, M.D.
Eugene J. Nowak, M.D.
Denise Carol Semashko, M.D.
Harry Statman, M.D.
Giles F. Whalen, M.D.

Clinical Affiliates (Surgery)
David A. Mayer, M.D.
Don Zwickler, M.D.

Surgeon's Assistants
Elizabeth Bergland
Theresa J. Frey
Naomi Friedman
Lisa J. Gengo
Donna M. Hamilton
David Johnson
John Lee
Mary L. Lombardi
Geoffrey O'Sullivan
Manreza R. Palacios
Ana E. Riccio
Howard F. Rose

Graduate Staff

Clinical Fellows
Yuman Fong, M.D.
Gabriel J. Garcia Talavera, M.D.
Cyril F. Halbert, M.D.
Robert E. Helm, M.D.
Haideh Hirmand, M.D.
Richard E. Kirschner, M.D.
Walton J. Montegut, M.D.
Suzanne B. Schwartz, M.D.
Sarah A. Stackpole, M.D.
Kimberly J. Van Zee, M.D.

Surgeons
Michael S. Conte, M.D.
Eva Fischer, M.D.
Stephen T. Greenberg, M.D.
Randal D. Haworth, M.D.
Nicole J. Kafka, M.D.
Wilson Ko, M.D.
Andrew M. Lowy, M.D.
Faith A. Menken, M.D.
Michael R. Zenn, M.D.

Assistant Surgeons
Hazem Y. Afifi, M.D.
Rashid M. Ahmad, M.D.
Norma Bacilious, M.D.
Michael K. Banbury, M.D.
John D. Berne, M.D.
M. Christine Brown, M.D.
John F. Carew, M.D.
Jeffrey C. Chan, M.D.
David J. Eisenman, M.D.
Michael W. Fletcher, M.D.
Kenneth R. Fretwell, M.D.
Jeffrey E. Gershenwald, M.D.
Leonard N. Girardi, M.D.
Drew P. Greeley, M.D.
Saeed S. Hamid, M.D.
Stephen U. Harris, M.D.
Arthur S. Hawes, M.D.
Walter C. Hayne, M.D.
Jill E. Hickling, M.D.
John J. Hong, M.D.
Mary Ann Hopkins, M.D.
Eun Sil Hwang, M.D.
Kenneth D. Jung, M.D.
Sandip Kapur, M.D.
Milan Kinkhabwala, M.D.
John D. Klemperer, M.D.
Samantha E. Kwon, M.D.
Thomas K. Lee, M.D.
Gary E. Lemack, M.D.
Charles A. Mack, M.D.
Christopher J. Magovern, M.D.
Martin D. McCarther, M.D.
Leslie L. Montgomery, M.D.
Imtiaz A. Munshi, M.D.
Laurence T. O'Connor Jr., M.D.
J. Martin Perez, M.D.
Tracy M. Pfeifer, M.D.
William A. Thompson III, M.D.
Josephine Y. Tsai, M.D.
Robert G. Uzzo, M.D.
Ferdinand Velasco, M.D.
Steven F. Will, M.D.

Cardiothoracic Surgery

Attending Surgeon-in-Charge
O. Wayne Isom, M.D.

Attending Surgeon
David B. Skinner, M.D.

Associate Attending Surgeons
Jeffrey P. Gold, M.D.
Karl H. Krieger, M.D.
Samuel J. Lang, M.D.
John C. McCabe, M.D.
Valavanur A. Subramanian, M.D.

Assistant Attending Surgeons
Nasser K. Altorki, M.D.
Dennis A. Bloomfield, M.D.
Michael E. Burt, M.D., Ph.D.
William J. Cole, M.D.
Brian S. Geller, M.D.
Kenneth R. Krauss, M.D.
Gregory Macina, M.D.
Michael J. Robbins, M.D.
Todd K. Rosengart, M.D.
Ira Cliff Schulman, M.D.
Mark A. Seldon, M.D.
Jerome Simson, M.D.
Alan Spiegel, M.D.
Samala R. Swamy, M.D.

Graduate Staff

Thoracic Surgeons
John M. Brown III, M.D.
James S. Counce, M.D.
David M. Jablons, M.D.

Assistant Thoracic Surgeons
Robert B. Cameron, M.D.
Edward R. Kofsky, M.D.
Tyrone J. Krause, M.D.

Dentistry and Oral and Maxillofacial Surgery

Attending Oral Surgeon-in-Charge
Stanley J. Behrman, D.M.D.

Attending Dentists
Jason C. Lee, D.D.S.
John J. Putnam, D.D.S.

Associate Attending Oral Surgeon
David A. Behrman, D.M.D.

Associate Attending Dentist (Endodontist)
Nelson I. Mendell, D.M.D.

Associate Attending Dentist (Orthodontist)
Marc S. Lemchen, D.M.D.

Associate Attending Dentists (Periodontists)
Seymour M. Koteen, D.D.S.
Joseph E. Rowan, D.D.S.

Associate Attending Dentist (Prosthodontist)
Ivin B. Prince, D.D.S.

Associate Attending Dentist (TMJ)
Leonard E. Quitt, D.D.S.

Associate Attending Dentists
Lawrence A. Behrman, D.D.S.
Harry Lumerman, D.D.S.
Ernest R. Piccaro, D.D.S.

Assistant Attending Oral and Maxillofacial Surgeons
Steven M. Baum, D.D.S.
Robert D. Carpenter, D.M.D.
Gregory C. Chotkowski, D.M.D.
Thomas M. Darrigan, D.D.S.
Arthur C. Elias, D.M.D.
Michael R. Glogoff, D.M.D.
Jerry L. Halpern, D.D.S.
Andrew J. Hauser, D.D.S.
Claudia B. Kaplan, D.D.S.
Frederick M. Lifshey, D.D.S.
Jonathan T. Perry, D.D.S.
Peter H. Pruden, D.D.S.
Steven J. Tunick, D.M.D.

Assistant Attending Dentists (Endodontists)
Sebastian J. Lentini, D.D.S.
Andrew Seth Melinger, D.M.D.

Assistant Attending Dentists (Orthodontists)
Brendan J. Boylan, D.D.S.
Mark Jay Bronsky, D.M.D.
Brendan M. Cooney, D.D.S.
Richard A. Sigler, D.D.S.
Michael G. Steinberg, D.D.S.

Assistant Attending Dentists (Pedodontists)
Louis M. Cooper, D.D.S.
Mark S. Hochberg, D.D.S.
David J. Levine, D.D.S.
Jack L. Mitchell, D.D.S.

Assistant Attending Dentists (Periodontists)
Barry M. Libin, D.D.S.
Philip D. Pack, D.M.D.
George W. Sferra Jr., D.D.S.

Assistant Attending Dentists (Prosthodontists)
Jennifer J. Burrell, D.D.S.
James H. Doundoulakis, D.M.D.
Charles A. Lennon, D.M.D.

Assistant Attending Dentists
Richard F. Giannandrea, D.D.S.
Robert Karsten, D.D.S.
Guy N. Minoli, D.D.S.
Edward J. Prus, D.D.S.
Steven Saltzman, D.D.S.
Robert M. Sorin, D.M.D.
Michael J. Vassallo, D.D.S.

Graduate Staff

Oral and Maxillofacial Surgeon
Gayle Tutone Miranda, D.D.S.

Assistant Oral and Maxillofacial Surgeons
Richard G. Gray, D.M.D.
Morgan E. Norris III, D.D.S.

Intern in Oral and Maxillofacial Surgery
Cary H. Miles, D.D.S.

Interns - General Practice Residency Program
Alexandra Antonopoulou, D.M.D.
Jenny A. Kanganis, D.D.S.
Margaret M. O'Reilly, D.M.D.

Neurosurgery

Attending Surgeon-in-Charge
Russel H. Patterson Jr., M.D.

Attending Surgeon
Richard A. R. Fraser, M.D.

Associate Attending Surgeons
Joseph H. Galicich Jr., M.D.
Francis W. Gamache Jr., M.D.
Michael H. Lavyne, M.D.
Robert B. Snow, M.D.

Assistant Attending Surgeons
Jamshid B.G. Ghajar, M.D.
Kevin J. Tracey, M.D.

Graduate Staff

Clinical Fellow
Robert J. Hariri, M.D., Ph.D.

Surgeon
Stanley B. Martin, M.D.

Assistant Surgeons
Mark H. Bilsky, M.D.
Kevin M. Cockroft, M.D.
Ethan Taub, M.D.
Gary A. Zimmerman, M.D.

Orthopedics

Surgeon-in-Chief, The Hospital for Special Surgery
Andrew J. Weiland, M.D.

Attending Surgeons
Allan E. Inglis, M.D.
Joseph M. Lane, M.D.
Richard S. Laskin, M.D.
David B. Levine, M.D.
Chitranjan S. Ranawat, M.D.
Leon Root, M.D.
Eduardo A. Salvati, M.D.
Thomas P. Sculco, M.D.
Russell F. Warren, M.D.
Philip D. Wilson Jr., M.D.

Associate Attending Surgeons
Walther H. O. Bohne, M.D.
Stephen W. Burke, M.D.
Charles N. Cornell, M.D.
John H. Healey, M.D.
David L. Helfet, M.B., B.Ch.
John P. Lyden, M.D.
Peter J. Marchisello, M.D.
Ralph C. Marcove, M.D.
Richard McCormack Jr., M.D.
Paul M. Pellicci, M.D.
Thomas L. Wickiewicz, M.D.
Russell E. Windsor, M.D.

Assistant Attending Surgeons
Michael M. Alexiades, M.D.
Stephen C. Allen, M.D.
David W. Altchek, M.D.
Abraham T. Appleton, M.D.
Roberta Brockman, M.D.
Frank P. Cammisa Jr., M.D.
Jonathan T. Deland, M.D.
David M. Dines, M.D.
Mark P. Figgie, M.D.
Steven B. Haas, M.D.
Jo A. Hannafin, M.D., Ph.D.
Robert N. Hotchkiss, M.D.
Michael J. Maynard, M.D.
Stephen J. O'Brien, M.D.
Kostas P. Velis, M.D.

Graduate Staff

Surgeons
Edward A. Athanasian, M.D.
Henry A. Backe Jr., M.D.
Field T. Blevins, M.D.
Joseph Borrelli Jr., M.D.
George L. Caldwell Jr., M.D.
G. Hadley Callaway, M.D.
Vivian K. Chang, M.D.
Rajiv G. Deshmukh, M.B. B.S.
Brian G. Evans, M.D.
Michelle Gerwin, M.D.
Jeffrey L. Hanway, M.D.
Joseph J. Jankiewicz, M.D.
Arthur L. Malkani, M.D.
Gregory S. McDowell, M.D.
Martin J. O'Malley, M.D.
Michael J. Pagnani, M.D.
Louis H. Rappoport, M.D.
Jeffrey J. Roberts, M.D.
Paul T. Rubery Jr., M.D.
Stephen C. Saddler, M.D.
Andrew V. Slucky, M.D.
Richard M. Terek, M.D.
Daniel M. Veltri, M.D.

Assistant Surgeons
Robert J. Adelman, M.D.
Brian J. Bear, M.D.
Christopher T. Behr, M.D.
Leslie J. Bisson, M.D.
Mathias P. G. Bostrom, M.D.
John T. Braun, M.D.
Michael G. Browne, M.D.
Blackshear M. Bryan III, M.D.
Brian J. Cole, M.D.
Mark A. Deitch, M.D.
Daniel W. Green, M.D.
Tamara L. Guion, M.D.
David M. Kalainov, M.D.
John C. L'Insalata, M.D.
John D. Macgillivray, M.D.
Kenneth D. Montgomery, M.D.
Thomas P. Moran, M.D.
George A. Paletta Jr., M.D.
Scott Alan Rodeo, M.D.
Jose A. Rodriguez, M.D.
S. Robert Rozbruch, M.D.
Garth R. Smith, M.D.
Stephanie R. Stephens, M.D.
Geoffrey H. Westrich, M.D.
Stephen J. Zabinski, M.D.

Plastic Surgery

Attending Surgeon-in-Charge
Lloyd A. Hoffman, M.D.

Attending Surgeons
Dicran Goulian, M.D.
Randolph H. Guthrie Jr., M.D.
James W. Smith, M.D.
Andrew J. Weiland, M.D.

Assistant Attending Surgeons
Gary S. Bromley, M.D.
Robert L. Cucin Jr., M.D.
Joseph Feinberg, M.D.
Lloyd B. Gayle, M.D.
Robert T. Grant, M.D.
David A. Hidalgo, M.D.
Gerald Imber, M.D.
Martin E. Kessler, M.D.
Gregory S. La Trenta, M.D.
Thomas C. McLure III, M.D.

Edward W. Powers III, M.D.
Philip G. Prioleau, M.D.
Kenneth O. Rothaus, M.D.
Robert G. Schwager, M.D.
B. Donald Sklansky, M.D.

GRADUATE STAFF

Surgeons
Norick Bogossian, M.D.
Joseph L. DeBellis, M.D.

Assistant Surgeons
Armann O. Ciccarelli, M.D.
Kenneth R. Francis, M.D.
Edmund Kwan, M.D.
Craig S. Rock, M.D.

UROLOGY

Attending Surgeon-in-Charge
E. Darracott Vaughan Jr., M.D.

Attending Surgeons
Jerry G. Blaivas, M.D.
William R. Fair, M.D.
John H. McGovern, M.D.
Edward C. Muecke, M.D.
Robert S. Waldbaum, M.D.
Willet F. Whitmore Jr., M.D.
John J. Williams, M.D.

Associate Attending Surgeons
Neil H. Bander, M.D.
Richard H. Bard, M.D.
John W. Coleman, M.D.
John A. Fracchia, M.D.
Marc Goldstein, M.D.
Harry W. Herr, M.D.
David T. Mininberg, M.D.
W. Reid Pitts Jr., M.D.
Jon M. Reckler, M.D.
R. Ernest Sosa, M.D.

Assistant Attending Surgeons
Joel Abramowitz, M.D.
Martin M. Alexander, M.D.
Carlos Arango, M.D.
Noel A. Armenakas, M.D.
Stephen R. Baumgarten, M.D.
John D. Birkhoff, M.D.
John C. Byrne, M.D.
Peter N. De Sanctis, M.D.
Jean-Francois Eid, M.D.
Stephen Fortunoff, M.D.
Suzanne L. Frye, M.D.
Bruce R. Gilbert, M.D.
Jeffrey Glasser, M.D.
Robert W. Gluck, M.D.
Michael M. Gross, M.D.
Frederick A. Gulmi, M.D.
Jack I. Hershman, M.D.
Arno D. Housman, M.D.
Marc S. Kaplan, M.D.
Joel Karp, M.D.
Nachum M. Katlowitz, M.D.
Albert N. Kim, M.D.
Howard N. Kivell, M.D.
Marcus H. H. Loo, M.D.
Franklin C. Lowe, M.D.
Isaac Madeb, M.D.
James P. McCarron Jr., M.D.
Thomas P. McGovern, M.D.
Piero O. Niceta, M.D.
Carl M. Pellman, M.D.
Ben I. Preminger, M.D.
Jeffrey J. Sandhaus, M.D.
Michael A. Savino, M.D.
Peter N. Schlegel, M.D.
Saeid Shamsian, M.D.
Vincent J. Tumminello, M.D.
Sasha Wainstein, M.D.
Michael H. Wechsler, M.D.
Gilbert J. Wise, M.D.
Morey Wosnitzer, M.D.

GRADUATE STAFF

Clinical Fellows
Richard P. Abramson, M.D.
William W. Jow, M.D.
Steven Jon Shichman, M.D.

Surgeons
Thomas W. Jarrett, M.D.
Aaron P. Perlmutter, M.D.
George P. H. Young, M.D.

Assistant Surgeons
Robert G. Britanisky, M.D.
Michael E. Chen, M.D.
Douglas W. Fields, M.D.
Thomas A. Gardner, M.D.
Sarah C. Girardi, M.D.
Dix P. Poppas, M.D.
Alexander P. Vukasin, M.D.
E. James Wright III, M.D.

DIRECTORS OF LABORATORIES

Clinical Pathology Laboratories

Pathologist-in-Chief
John T. Ellis, M.D.

Laboratory Manager
Marvin Tessler, Ph.D.

Blood Bank and Transfusion Service
Director
Carl F.W. Wolf, M.D.
Assistant Director
Kathleen A. Leonard, M.D.

Clinical Biochemistry
Director
Kenneth Emancipator, M.D.

Clinical Hematology
Director
Powers Peterson, M.D.

Clinical Microbiology
Director
Laurence B. Senterfit, Sc.D.

Associate Director
Renate F. Klein, Ph.D.

Cytogenetics
Director
M. Lita Alonso, M.D.

Cytology
Director
Charles A. Santos-Buch, M.D.

Assistant Director
June H. Koizumi, M.D.

Surgical Pathology
Director
C. Richard Minick, M.D.

Associate Director
Janet A. Mouradian, M.D.

Clinical Laboratory Computer Services

Director
Jerald D. Gass, Ph.D.

CLINICAL DIAGNOSTIC LABORATORIES, DIRECTORS

Cardiac Catheterization, Adult
Timothy Sanborn, M.D.

Cardiac Catheterization, Pediatrics
Aaron R. Levin, M.D.

Cardiac Graphics, Adult
Paul D. Kligfield, M.D.

Cardiac Graphics, Pediatrics
Kathryn H. Ehlers, M.D.

Electroencephalography
Gail E. Solomon, M.D.

Neurophysiology
Jonathan Victor, M.D., Ph.D.

Nuclear Medicine
David V. Becker, M.D.

Pulmonary Function
Thomas K.C. King, M.D.

DIVISION OF NURSING

Senior Administrative Staff

Vice President for Nursing
Anne Alexis Coté, M.P.A., R.N.

Director of Nursing Administration
Doris Glick, M.P.H., R.N.

Directors

Ambulatory Care Nursing
Susan Zori, M.A., R.N.

Critical Care Nursing
Elizabeth McCormick, M.S., R.N.

Medical Nursing
Maureen Schneider, M.S., R.N.

Nursing Education
Sally Ann Corbo, M.A., R.N.

Nursing Practice
Janet L. McBride, M.A., R.N.

Perioperative Services
Elizabeth Wein, M.P.S., R.N.

Psychiatric Nursing
Payne Whitney Clinic
Kenneth Larson, M.P.A., R.N.

Surgical Nursing
Jody Sklar, M.A., R.N.

Women and Children's Health Nursing
Shelley Adelman, M.S., R.N.

DEPARTMENT OF PHARMACY

Apothecary-in-Chief
W. James Bicket, M.S.

Cornell University Medical College Faculty

The New York Hospital-Cornell Medical Center

All members of The New York Hospital attending staff also hold faculty appointments at Cornell University Medical College. Listed below in rank order are **CUMC additional faculty** in the clinical departments at The New York Hospital-Cornell Medical Center who hold only medical college appointments, followed by the faculty in the basic science departments. Included here are faculty on all five appointment tracks: tenure, academic-clinical, clinical, research, and voluntary. These lists include full-time and part-time faculty, including those who have adjunct, visiting, and courtesy appointments.

Honorary and emeritus staff members at The New York Hospital hold or held CUMC faculty appointments. Immediately below are further medical college emeritus faculty members at the ranks of professor and associate professor.

Cornell University Medical College (January 1, 1993)

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Auxiliary

Founded in 1912 by the wives of three hospital governors and with more than 120 members today, The Auxiliary of The Society of the New York Hospital supports the work of the hospital in many ways. Funds are raised through the operation of the gift shop located in the hospital lobby, as well as from membership dues and special events.

In 1992, the Auxiliary contributed a total of $260,000 for hospital projects. Its fourth annual Halloween raffle raised over $73,000, which was donated to the Children's Pain Control Program, division of pediatric infectious diseases, and the Children's AIDS Program.

Other major donations by the Auxiliary were as follows:

- $50,000 for the replacement of the vehicle for the care coach service;
- $40,000 toward the purchase of a state-of-the-art Acuson machine for the obstetric ultrasound unit of the department of obstetrics and gynecology;
- $13,800 to the Asthma and Allergy Center, department of pediatrics, for the purchase of diagnostic equipment.

The Auxiliary carried on its tradition of support for the Volunteer Services for the Elderly of Yorkville. It also continued to provide funding for the diversional crafts program of the hospital's department of rehabilitation medicine, and for publication of The New York Hospital page that appears periodically in the publications, *Our Town* and *The Resident*.

Volunteers

In 1992, 873 volunteers gave more than 82,000 hours in over 150 departments and programs of The New York Hospital. Their extraordinary dedication is seen in countless ways throughout the years — hundreds of volunteers come to the hospital every day, giving of themselves in order to help those who are ill, in need, and in crisis. The numerous services they provide include reading or playing with pediatric patients, staffing information desks, counseling sexual-assault victims, working in the hospital's gift shop, and assisting patients in the emergency room.

Among the awards for levels of service achieved by year's end are:

20 Years
Phyllis Cohen

15 Years
Lilo Komor

10 Years
Rebecca Globerman
Anne Kolinko
Josephine Pecorino

5 Years
Gladys Alesi
Beatrice Benetar
Ondina Bobadilla
Richard Rosenblatt
Mary Zecca

40,000 Hours
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Phyllis Cohen

6,000 Hours
Lois Kaufman

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3,000 Hours
Ruth Dubow
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Making a Gift to The New York Hospital-Cornell Medical Center

Gifts, bequests and trusts are important sources of support for The New York Hospital-Cornell Medical Center. Such gifts provide funding for a wide range of programs, including those that provide patient care, educate future physicians and scientists, and expand community outreach. Additionally, these gifts make possible pioneering biomedical research which results in new and improved cures and treatments for disease, helping people today, as well as in future generations.

Gifts may be made in a number of ways — by cash, securities, or other property. They may be given outright, by bequest, or through a trust arrangement which can provide an income to the medical center, to the donor, or to his or her beneficiaries, for a predetermined period of time or for life.

The medical center encourages gifts without restriction so as to permit greater flexibility in planning and administering its extensive programs in patient care, education, and research. However, if a donor is interested in making a gift, bequest, or trust to be used in whole or in part for any specific purpose within the hospital, medical college, or medical center, such use may be specified.

The New York Hospital-Cornell Medical Center is comprised of The Society of the New York Hospital and Cornell University Medical College. Both the Society and Cornell University, of which the medical college is a part, are qualified not-for-profit institutions which receive major support from private gifts. Gifts to the hospital, medical college, and medical center by individuals, foundations, or corporations are exempt from income, gift, and inheritance taxes to the extent and in the manner provided by federal and state laws.

The medical center is pleased to provide information about its numerous programs and activities, and to consult with donors and their advisors about various gift ideas, many of which provide a naming opportunity. Our Guide to Giving is available by calling the number listed below.

The Society of the New York Hospital, which is the legal corporate name for The New York Hospital, is a corporation created by Royal Charter granted by King George III of England in 1771. The suggested terminology for an unrestricted bequest to or for its benefit is: *"I give, devise and bequeath to The Society of the New York Hospital Fund, Inc., a corporation created under the New York State Not-for-Profit Corporation Law and located in New York City, New York the sum of $_____ (or description of the property) to be used for the general corporate purposes of The Society of the New York Hospital as its Board of Governors should determine."*

If a bequest is made to the medical college, the language may be: *"I give and bequeath to Cornell University the sum of $_____ (or description of property) for use in connection with its medical college in New York City."*

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Further information about making a gift to the hospital, college, or medical center can be obtained from **Robert A. Burch, Vice President and Vice Provost for Development, The New York Hospital-Cornell Medical Center, 525 East 68th Street, New York, NY 10021, 212-746-4070.**

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